N	hild Yes	income, transactions, or liabilities of a spouse or dependent child	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption?
S	oted Yes	regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
	STIONS	MATION ANSWER EACH OF THESE QUE	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS
		schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.
ρropriate	l and the ap	Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability (more V. than \$10,000) during the reporting period? Yes No
		If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.
й П	outside Yes	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Yes No is
3		If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule III.
W No	ling in the Yes	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth Yes V No more than \$4 000 at the end of the nector?
		If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
₩	ile travel or 1an \$305 Yes	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$305 from one source)?	Did any individual or organization make a donation to charity in lieu of paying
		If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
No K	le gift in therwise Yes	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
		OF THESE QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE
	late.	nation	Type
1 30 days	more than 30 days	Termination Date:	
A \$200 penalty shall be assessed against anyone who files	A \$200 penalty si be assessed aga	Officer Or Employing Office: Employee	Filer Member of the U.S. State: TN House of Representatives District: 04
(Office Use Only)	(Office t	(Daytime Telephone)	(Full Name)
2008 JUN 11 PM 3: 58	Me 2011	202-225-6831	Lincoln Edward Davis
HAND DELIVERED	Į	For use by Members, officers, and employees	FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

SCHEDULE I - EARNED INCOME

Name Lincoln Edward Davis

Page 2 of 4

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Туре	Amount
Pickett County Board of Education	Spouse Salary	N/A
State of Tennessee Retirement	Pension	\$8,820

Page 3 of 4

		Name Lincoln Edward Davis	oward Davis		4 0 0 1
	BLOCK A	вгоск в	вгоск с	BLOCK D	BLOCK E
ASSE Identify (a) ea a fair market \ and (b) any ot than \$200 in " land, provide mutual funds retirement pla in which you specific inves each asset in retirement pla the account a active busines business, the Block A. For a Exclude: Your debt owed to parent or sibli savings accou Government r	Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
	Diversified Construction Company Assets include equipment and real estate	\$250,001 - \$500,000	CAPITAL GAINS	\$50,001 - \$100,000	
TL	Farm land: 507 acres co- owned with Brother in Fentress & Pickett County	\$500,001 - \$1,000,000	None	NONE	

SCHEDULE VIII - POSITIONS

Name Lincoln Edward Davis

Page 4 of 4

representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, honorary nature; and positions listed on Schedule I.

Position E	Name of Organization Diversified Construction Company
	Diversified Construction Company PO Box 358 Brydstown, TN